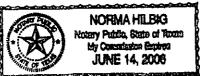
JUDICIAL CA	FORM JC/OH				
CAMPAIGNE	INANCE REPORT 5904	COVER SHEET PG 1			
The JC/OH INSTRUCTION form.	N GUIDE explains how to complete this (Ethics Commission filers)	2 Total pages filed:			
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Effaih NICKNAME LAST SUFFIX De La Fuente	OFFICE USE ONLY Date Received TRAVIS COUNTY COUNTY COUNTY			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 6320 Taylor Cost Drive Austin, TX 78749	Date Hand-defive fed of Date Fostmarked			
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION	Receipt # Amount			
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI Geronimo NICKNAME LAST SUFFIX	Date Imaged			
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE). APT/SUITE #: CITY; STATE: 916 Congress Arenae, Su; to 1280 Austin TX 78701	ZIP CODE			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 477-7/61				
9 REPORTTYPE	January 15 30th day before election Runoff July 15 8th day before election Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder enly) Final report (Attach C/OH - FR)			
10 PERIOD COVERED	Month Day Year THROUGH 01 /17	/ 2005			
11 ELECTION	ELECTION DATE Month Day Year O3 / O9 / 2004 Primary Runoff	General Special			
12 OFFICE	OFFICE HELD (if any) 13 OFFICE SOUGHT (if know) Other - Coun	ty Court at Law 5			
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER	Direct campaign expenditures are campaign expenditures made by others without the car Candidates are required to disclose this information only if they receive notification of the direction of the directio				
INDIVIDUALS	Address / PO Box; Apt / Suite #: City. State; Zip Code				
additional pages	•				
GO TO PAGE 2					

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: **SUPPORT & TOTALS**

FORM JC/OH COVER SHEET PG 2

<u> </u>		<u> </u>	
15 C/OH NAME	-	1	6ACCOUNT # (E:nics Commission filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	may have been mad	olice of political expenditures by political committees to support the care without the candidate's or officeholder's knowledge or consent. Candi if they receive notice of such expenditures.	
COMINITY EE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	COMMITTEE ADDRESS	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
addilional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS	
18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED S O.OO		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 0.00
EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZ TOTALS		\$ 0.00	
•	4. TOTAL	POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST (REPORTING PERIOD	\$ 4,635.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00		
19 AFFIDAVIT		,	



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said EFRain DelaFuente , to certify which; witness my hand and seal of office.

Signature of officer administering oath

		SIGNATION OF FINAL REPORT	POR I:	FORM C/OH - FR				
		The Instruction Guide explains how to complete this form. •• Complete only if "Report Type" on page 1 is marked "Final Report" ••						
1	C/OH!	Frain De La Frient	· .	2 ACCOUNT # (Ethics Commission filers)				
3	SIGN	ATURE		•				
	а гер	. not expect any further political contributions or political expenditures port as a final report terminates my campaign treasurer appointm ibutions or make any campaign expenditures without a campaign tre	nent. 🗆 also understand (that I may not accept any campaign e.				
4		WHO IS NOT AN OFFICEHOLDER plete A & B below only if you are not an officeholder. ••						
	A.	CAMPAIGN FUNDS						
	Chec	Check only one:						
		I do not have unexpended contributions or unexpended interest or income earned from political contributions.						
		I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after fitting this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.						
	В.	ASSETS		•				
	Chec	k only one:						
	\boxtimes	1 do not retain assets purchased with political contributions or interest or other income from political contributions.						
		I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.						
			Sig	nature of Candidate				
5		EHOLDER plete this section <i>only</i> if you are an officeholder ••	:					
		I am aware that I remain subject to filing requirements applicable to a am also aware that I will be required to file reports of unexpended courchased with political contributions or interest or other income from	ontributions if, at the time	I cease holding office, I retain assets				
-			٠.					
			Sigr	nature of Officeholder				